

MEDICAL AND HEALTH DATA									
INJURY INFORMATION 30. IMMEDIATE CAUSE GIVEN IN PART I. 31. OTHER SIGNIFICANT CONDITIONS—CONTRIBUTING TO DEATH, BUT NOT RELATED TO THE IMMEDIATE CAUSE: (A) WHICH GAVE RISE TO THE IMMEDIATE CAUSE (B) WHICH GAVE RISE TO THE IMMEDIATE CAUSE (C) DELAYING CAUSE LAST. 32. CONDITIONS IF ANY 33. DATE OF INJURY (Month, Day, Year) 34. TIME OF INJURY (24 Hour Clock) 35. PLACE OF INJURY (Specify home, farm, factory, freeway, street, office buildings, etc.) 36. Were laboratory tests done for: 37. Were laboratory tests done for: 38. Were laboratory tests done for: 39. Describe how injury occurred (enter sequence of events which resulted in injury, NATURE OF INJURY) 40. If motor vehicle accident, specify: 41. If decedent was driver, passenger, pedestrian, or bicyclist, specify: 42. If decedent was driver, passenger, pedestrian, or bicyclist, specify: 43. If decedent was driver, passenger, pedestrian, or bicyclist, specify: 44. If decedent was driver, passenger, pedestrian, or bicyclist, specify: 45. If decedent was driver, passenger, pedestrian, or bicyclist, specify: 46. If decedent was driver, passenger, pedestrian, or bicyclist, specify: 47. If decedent was driver, passenger, pedestrian, or bicyclist, specify: 48. If decedent was driver, passenger, pedestrian, or bicyclist, specify: 49. If decedent was driver, passenger, pedestrian, or bicyclist, specify: 50. If decedent was driver, passenger, pedestrian, or bicyclist, specify:									
CAUSE OF DEATH 51. CARDIAC ONSET 52. DECOMPENSATION 53. ARTERIO-SCLEROTIC HEART DISEASE 54. INTERVAL BETWEEN ONSET AND DEATH 55. INTERVAL BETWEEN ONSET AND DEATH 56. INTERVAL BETWEEN ONSET AND DEATH 57. IF YES, were findings considered in determining cause of death? 58. AUTOPSY 59. IF YES, were findings considered in determining cause of death? 60. IF YES, were findings considered in determining cause of death?									
FUNERAL DIRECTOR AND LOCAL REGISTRAR 61. NAME AND LOCATION OF CEMETERY OR CREMATORY 62. SIGNATURE OF FUNERAL DIRECTOR 63. DATE 64. REMOVAL 65. BURIAL 66. NAME AND LOCATION OF CEMETERY OR CREMATORY 67. SIGNATURE OF FUNERAL DIRECTOR 68. DATE 69. REMOVAL 70. BURIAL 71. NAME AND LOCATION OF CEMETERY OR CREMATORY 72. SIGNATURE OF FUNERAL DIRECTOR 73. DATE 74. REMOVAL 75. BURIAL 76. NAME AND LOCATION OF CEMETERY OR CREMATORY 77. SIGNATURE OF FUNERAL DIRECTOR 78. DATE 79. REMOVAL 80. BURIAL 81. NAME AND LOCATION OF CEMETERY OR CREMATORY 82. SIGNATURE OF FUNERAL DIRECTOR 83. DATE 84. REMOVAL 85. BURIAL 86. NAME AND LOCATION OF CEMETERY OR CREMATORY 87. SIGNATURE OF FUNERAL DIRECTOR 88. DATE 89. REMOVAL 90. BURIAL 91. NAME AND LOCATION OF CEMETERY OR CREMATORY 92. SIGNATURE OF FUNERAL DIRECTOR 93. DATE 94. REMOVAL 95. BURIAL 96. NAME AND LOCATION OF CEMETERY OR CREMATORY 97. SIGNATURE OF FUNERAL DIRECTOR 98. DATE 99. REMOVAL 100. BURIAL 101. NAME AND LOCATION OF CEMETERY OR CREMATORY 102. 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